

Crisis Therapeutic Home Capacity Review
Review Period: 12/1/15 - 6/30/16

CTH Admissions

Between December 1, 2015 and June 30, 2016, the five Crisis Therapeutic Homes (CTHs) had a combined 340 total admissions. During these seven months, 158 of the admissions were preventative in nature with an average length of stay of 8 days, with some outliers as detailed below.

Across all Regions, six non-crisis stays lasted more than 30 days.

- 4 in Region IV- 3 < 60 days, 1 > 90days- All have been Discharged
- 1 in Region III- 1 < 90 days- Has been Discharged
- 1 in Region V- 1 > 90 days – Not yet discharged- This individual was not affiliated with a CSB and did not have sufficient documentation for the CSB to confirm the intellectual disability. This has been remedied, and a psychological assessment the CSB needs has been completed.

The remaining 182 CTH admissions were crisis in nature with an average length of stay of 21 days, with some outliers as detailed below.

Twenty-nine crisis stays exceeded 30 days.

- 4 in Region I
 - 1 < 60 days, 1 <90 days, 2 >90 days
 - None were on a waiver or on a waiver waiting list
 - All came from a private residence
 - Two were also not connected to a CSB
 - All have been discharged
- 6 in Region II
 - 1 < 60, 3<90, 2>90
 - 3 were not on the waiver or waiver waiting list, 1 was on the waitlist, 1 had active DD waiver, and 1 had active ID waiver
 - All came from a private residence
 - One was also not connected to a CSB
 - All have been discharged
- 6 in Region III
 - 3 < 60 days, 3>90
 - 1 was not on waiver or waitlist; 1 was on waitlist, and 4 were on ID waivers
 - 1 stepped down from a jail, 2 came from foster homes, 1 homeless, 1 private residence, and 1 came from a residential provider
 - All have been discharged
- 6 in Region IV
 - 4 < 60, 1 < 90, and 1 > 90
 - 2 were not on the waiver or waiting list, 1 was on the waiting list, and 3 were on ID waiver
 - 2 were not connected to a CSB

- All have been discharged
- 7 in Region V
 - 5 < 60, 2 < 90
 - 2 were not on the waiver or waiver waiting list
 - 3 came from private residences, 1 homeless
 - All have been discharged

Summary:

1. 90% of all CTH stays resulted in a stay of less than 30 days.
2. Of the 35 stays over 30 days, 49% (17) of those stays were less than 60 days.
3. Of the 35 stays over 30 days, 20% (7) were less than 90 days.
4. From December 1, 2015 through June 30, 2016, there were no days when all of the available beds (30 beds across the five homes) were occupied.

Current changes that may impact CTH capacity:

1. Implementation of waiver redesign should begin to minimize some of these longer stays:
 - a. A new emergency/reserve slot allocation process being implemented by DBHDS should be able to address some of the individuals in need of ongoing supports and services.
 - b. Individuals with Developmental Disabilities will have access to different supports under the Family and Individual Supports waiver that were not previously available.
 - c. Individuals with Developmental Disabilities who have higher residential support needs can also now access the Community Living Waiver.
 - d. The amended waivers will allow for a customized rate (implementation date of customized rate projected for February 1, 2017) for those individuals who need more than typical supports in order to be served in the community.
2. Effective 10/1/16, REACH programs are working with the Department to ensure weekly updates are provided that include progress made in securing stable housing, next steps necessary for a community placement to be achieved, and current barriers to securing stable housing.
3. A CTH capacity chart has been added to the quarterly REACH report to ensure that there is a broader understanding of the capacity across the Commonwealth as well as in each Region.

Recommendations:

The Department convened a small work group made up of Developmental Disability and Mental Health professionals both from the community and state operated facilities. This work group has developed a proposal for the development of two adult programs that can function as a step up

from REACH and a step down from psychiatric hospitals. This program is envisioned to serve those individuals who will need more than a typical 30 day crisis stabilization stay at the REACH program due to a combination of mental health, behavioral and developmental support needs. The program is designed to be short term in nature with an approximate length of stay of 6 months. A longer length of stay than can be managed with admission to the CTHs will ensure appropriate clinical assessment and the ability to allow time for provider development and transition planning when or if needed. This program will utilize a similar practice for provider development and discharge process as is currently used in the state operated training centers. The unique design of this program is intended to allow providers to receive training with the individual while they reside at this program and allows the program to send staff to the provider agency and train and work with the individual in this setting as well.

This proposal will be further vetted by an internal data driven review committee which will include professionals from:

- Division of Developmental Services, including facilities and community operations;
- Division of Mental Health & Forensic Services, including facilities and community operations;
- Division of Quality Management and Development, including Data Warehouse and Risk Management, and;
- Representatives of REACH (child community crisis system)

This review committee will review REACH data as well as data from the hospital retrospective to continue to inform the Department's delivery of crisis services to help guide next steps in the development of community crisis services.